IR: Part 1 Application Checklist

This checklist is <u>not</u> required to be submitted to the Health Policy Commission.

	Background Information File: Part 1 (Microsoft Excel)		
		All relevant fields have been completed	
		The file has been saved using the appropriate naming convention: <i>Background Information File_Part 1_[Provider Organization Name]</i>	
	Corpor	ate Organizational Chart: Part 1 (.PDF file)	
		The corporate organizational chart depicts all entities in which the Provider Organization has an ownership or controlling interest, whether clinical or non-clinical, and the Provider Organization's corporate parent(s), if applicable	
		The corporate organizational chart conforms to all of the requirements described in the Data Submission Manual: Part 1	
		The corporate organizational chart has been saved as a .PDF file	
		The corporate organizational chart has been saved using the appropriate naming convention: Corporate Organizational Chart_Part 1_[Provider Organization Name]	
	Corporate Affiliations File: Part 1 (Microsoft Excel)		
		All relevant fields have been completed	
		The file has been saved using the appropriate naming convention: Corporate Affiliations File_Part 1_[Provider Organization Name]	
	Contra	cting Affiliations File: Part 1 (Microsoft Excel)	
		All relevant fields have been completed	
		The file has been saved using the appropriate naming convention: Contracting Affiliations File_Part 1_[Provider Organization Name]	
	Affida	vit of Truthfulness (.PDF file)	
		The affidavit has been completed	

The form has been signed by two duly authorized representatives of the Provider Organization, one of whom is the CEO, COO, CFO, or equivalent
The form has been scanned and saved as a .PDF file
The form has been saved using the appropriate naming convention: <i>Affidavit of Truthfulness_Part 1_[Provider Organization Name]</i>